

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF CALIFORNIA

Case number (if known)

Chapter

9

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Tulare Local Healthcare District

2. All other names debtor used in the last 8 years
Include any assumed names, trade names and doing business as names

dba Tulare Regional Medical Center

3. Debtor's federal Employer Identification Number (EIN) 94-6002897

4. Debtor's address Principal place of business

Mailing address, if different from principal place of business

869 N. Cherry St.
Tulare, CA 93274

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Tulare
County

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) https://sites.google.com/view/tlhcd

6. Type of debtor

- ☐ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☒ Other. Specify: Municipality/Government Entity

Debtor Tulare Local Healthcare District
Name

Case number (if known) _____

7. Describe debtor's business A. Check one:

- ☒ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☐ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
 See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

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8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☒ Chapter 9
☐ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No.
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor _____	Relationship _____
District _____	When _____ Case number, if known _____

Debtor Tulare Local Healthcare District
Name

Case number (if known) _____

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☐ No

☒ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☒ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? Narcotics / Nuclear Medicines / Preservation of Patient Records/Patients

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property?

See Attached

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☒ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☐ Funds will be available for distribution to unsecured creditors.

☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

- ☐ 1-49
☐ 50-99
☐ 100-199
☒ 200-999

- ☐ 1,000-5,000
☐ 5001-10,000
☐ 10,001-25,000

- ☐ 25,001-50,000
☐ 50,001-100,000
☐ More than 100,000

15. Estimated Assets

- ☐ \$0 - \$50,000
☐ \$50,001 - \$100,000
☐ \$100,001 - \$500,000
☐ \$500,001 - \$1 million

- ☐ \$1,000,001 - \$10 million
☐ \$10,000,001 - \$50 million
☐ \$50,000,001 - \$100 million
☒ \$100,000,001 - \$500 million

- ☐ \$500,000,001 - \$1 billion
☐ \$1,000,000,001 - \$10 billion
☐ \$10,000,000,001 - \$50 billion
☐ More than \$50 billion

16. Estimated liabilities

- ☐ \$0 - \$50,000
☐ \$50,001 - \$100,000
☐ \$100,001 - \$500,000
☐ \$500,001 - \$1 million

- ☐ \$1,000,001 - \$10 million
☐ \$10,000,001 - \$50 million
☐ \$50,000,001 - \$100 million
☒ \$100,000,001 - \$500 million

- ☐ \$500,000,001 - \$1 billion
☐ \$1,000,000,001 - \$10 billion
☐ \$10,000,000,001 - \$50 billion
☐ More than \$50 billion

Debtor Tulare Local Healthcare District
Name

Case number (if known) _____

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

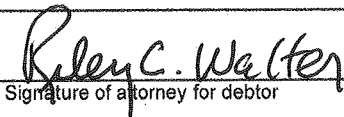
**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 9/29/2017
MM / DD / YYYYX 
Signature of authorized representative of debtorKevin B. Northcraft
Printed nameTitle Chairperson**18. Signature of attorney**X 
Signature of attorney for debtorDate Sept. 30, 2017
MM / DD / YYYYRiley C. Walter
Printed nameWalter Wilhem Law Group
Firm nameA Professional Corporation
205 E. River Park Circle, Ste. 410
Fresno, CA 93720-1563
Number, Street, City, State & ZIP CodeContact phone (559) 435-9800Email address rileywalter@w2lg.com91839
Bar number and State

Attachment to Chapter 9 Petition #12, Location of Property Needing Attention

**Tulare Local Healthcare District
dba Tulare Regional Medical Center
869 N. Cherry Street
Tulare, CA 93274**

**Hillman Healthcare Center
1062 South K Street
Tulare, CA 93274**

**West Street Medical Office
325 N. West Street
Tulare, CA 93274**

**Women's Pavilion
1437 E. Prosperity Ave.
Tulare, CA 93274**

**Earlimart School-Based Medical Office
398 S. Church Street
Earlimart, CA 93219**

**Mineral King Toxicology Lab
880 E. Merritt, Suite 107
Tulare, CA 93274**

**Evolutions Fitness & Wellness Center
1425 E. Prosperity Ave.
Tulare, CA 93274**

DECLARATION OF FISCAL EMERGENCY AND ADOPTION OF RESOLUTION

Tulare Local Healthcare District, dba Tulare Regional Medical Center

WHEREAS, the Board of Directors of the Tulare Local Healthcare District, dba Tulare Regional Medical Center ("TRMC") has placed the financial condition of TRMC on the agenda of a noticed public hearing which took place on September 29, 2017.

WHEREAS, at the noticed public hearing the following factual findings, among others, were made:

1. TRMC is or will be unable to pay its obligations within the next 60 days;
2. According to the report of TRMC's Manager Healthcare Conglomerate Associates ("HCCA") and CEO Dr. Benny Benzeevi, the Tulare Local Healthcare District has zero cash in its bank accounts, is in a dire financial situation, and is suffering from a critical cash shortage;
3. On September 28, 2017, HCCA failed or was otherwise unable to fund the entire gross payroll for employees staffing TRMC, citing the cash shortage by the Tulare Local Healthcare District as the cause;
4. The Tulare Local Healthcare District's inability to pay vendors has resulted in significant liabilities, and vendors critical to the operation of the District have discontinued service to TRMC;
5. The Tulare Local Healthcare District has insufficient cash to purchase adequate medical supplies for the operation of TRMC;
6. The cash shortage of the Tulare Local Healthcare District poses a risk to public health and safety;
7. There is an imminent risk of closure of the hospital;
8. The fiscal condition of TRMC constitutes a fiscal emergency;
9. Absent a Chapter 9 filing, the fiscal condition of TRMC puts the health, safety, and welfare of its patients in jeopardy;

THEREFORE, whereas the Board of Directors has determined it is in the best interests of the Tulare Local Healthcare District, dba Tulare Regional Medical Center, its creditors, bondholders, citizens, taxpayers, patients and employees and other interested parties that a petition be filed commencing a Chapter 9 bankruptcy under Title 11, United States Code.

RESOLVED that the form of the Petition for relief under Chapter 9, Title 11 of the United States Code, presented to this meeting is approved and adopted in all respects; and be it further

RESOLVED that Kevin B. Northcraft is hereby authorized and directed to execute and verify a petition for relief and to cause the same to be filed with the United States Bankruptcy Court for the Eastern District of California; and be it further

RESOLVED that Kevin B. Northcraft is authorized to execute and file all schedules, lists and other papers and to take any and all actions which they may deem necessary or proper in connection with proceedings under Chapter 9; and be it further

RESOLVED that the District retain and employ Walter Wilhelm Law Group and McCormick Barstow LLP as counsel for the District in these proceedings.

DATED: September 29, 2017



Kevin B. Northcraft, Chairperson